

### Tobacco Cessation Script

1. **Do you currently smoke or use tobacco?**
  - a. What kind of tobacco do you use?
  - b. About how long has it been since you last smoked a cigarette, even a puff?
2. **It is important for you to stop smoking (using tobacco) when you are having treatment. Smoking decreases the effectiveness of cancer treatment.**
3. **We will help you stop smoking (using tobacco) by referring you to the Michigan Tobacco Quitline. It is a free service.** Here is the Michigan Tobacco Quitline brochure to read and you can ask the doctor any questions when they come in to see you.
4. **To set up the referral, I need to confirm your phone number and the best time for the Quitline to call you. If you use a cell phone, let's program the Quitline number into your phone now. May they leave a message if you do not pick up when they call?**

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